E OF BIRTH	ARIZONA STATE BOARD OF HEALTH
strict of Inspiration ORIGINAL CER	TAL STATISTICS State Index No
)WE Of	2002 108-1 0 200-1
or (No	StWard)
JLL NAME OF CHILD. If child is not named, make Supplemental Report on bla	nk obtainable from local registrar. Born YES
ill FATHER sime Ira Boulding	Full MOTHER Maiden Name Comma Kamsel
ridence / Dis Tier	Residence Inspiration
Race Age at last Birthday (Years)	Color Age at last 3. or Race (2 Birthday (Years)
thplace	Birthplace The
cupation numer	Occupation Housewife.
of this mother	Were precautions taken against Ophthalmia neonatorum?
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*	
nereby certify that I attended the birth of the above child, and that it occurred on 1922, at M.	
When there is no attending physician or midwife, then the householder should make this return.	ignature) (Attending physician, midwife, householder.)
Given or Christian name added from a	Address B.W. Harry
pplemental report 192 Filed (LOCAL REGISTRAR.
527-22/-593 Filed Way 9	A True Copy 192.2 COUNTY REGISTRAR.